## 

Fil	l in this information t	o identify your c	case:	4.8								
De	ebtor 1	Ellen Penot										
	ebtor 2 ouse, if filing)											
Un	ited States Bankrup	tcy Court for the	e: EASTERN DISTRICT	OF PENNSYLVANIA	4							
Case number [18-12507]			_	Check if this	Check if this is:							
							An amended filing					
									owing postpetition he following date			
0	fficial Form	<u> 1061</u>					MM / DD	/ YYYY				
S	chedule I: `	Your Inc	ome							12/15		
		Employment	On the top of any additi	onai pages, write yo	our nam	e and	case number	if Known	ı). Answer ever	y question.		
	information.	Jyment .		Debtor 1			Debto	Debtor 2 or non-filing spouse				
	If you have more attach a separate information about employers.	e page with	Employment status	■ Employed			<b>≡</b> Em	■ Employed				
				☐ Not employed	□ No	☐ Not employed						
		annonal ar	Occupation	Coordinator		Labo	Laborer					
	self-employed wor	ed work.  Employer's name  Belmont Behaviorial					D. Liberati Construction Company					
	Occupation may ir or homemaker, if i		Employer's address	4200 Monument Road Philadelphia, PA 19131			13 Fourth Street Lansdowne, PA 19050					
		How long employed there?										
Pai	rt 2: Give Det	ails About Mor	nthly Income									
	mate monthly inco use unless you are s		ate you file this form. If y	ou have nothing to r	eport for	any lir	ne, write \$0 in t	he space.	. Include your no	n-filing		
	ou or your non-filing s e space, attach a se		ore than one employer, co this form.	mbine the informatio	n for all e	employ	vers for that per	son on th	ne lines below. If	you need		
						<u>.</u>	For Debtor 1		Debtor 2 or -filing spouse			
2.	List monthly gros deductions). If not	ss wages, sala t paid monthly, o	ry, and commissions (be calculate what the monthly	efore all payroll y wage would be.	2.	\$_	4,168.00	) \$	1,000.00	-		
3.	Estimate and list	monthly overt	ime pay.		3.	+\$_	0.00	)+\$	0.00	<u>-</u>		
4.	Calculate gross I		4.	\$	4.168.00	\$	1.000.00					

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Debtor 1		Ellen Penot			For Debtor 1 \$ 4,168.00			18-12507			
Co		by line 4 here	4.					r Debtor 2 n-filing sp			
_			٦.		4,100	5.00	\$_	1,0	00.00		
5.	List 5a.	all payroll deductions:  Tax, Medicare, and Social Security deductions	5a	а.	\$ 930	0.00	\$	1	00.00	)	
	5b.	Mandatory contributions for retirement plans	5b	Э.	\$(	0.00	\$		0.00	}	
	5c.	Voluntary contributions for retirement plans	5c	٥.	\$	0.00	\$		0.00		
	5d.	Required repayments of retirement fund loans	50			0.00	\$		0.00		
	5e.	Insurance	5e			0.00	. \$		0.00		
	5f.	Domestic support obligations	5f.			0.00	\$		0.00	_	
	5g.	Union dues	59			0.00	\$		0.00	_	
	5h.	Other deductions. Specify:	5h	1.+	\$(	0.00	+ \$		0.00		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$930	0.00	\$	1	00.00	<u> </u>	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 3,238	3.00	\$	9	00.00	<u> </u>	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	<b>1</b> .	\$ (	0.00	\$		0.00		
	8b.	Interest and dividends	8b			0.00	\$		0.00	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	<b>;</b> .		0.00	* <u> </u>		0.00		
	8d.	Unemployment compensation	8d		·	.00	\$		0.00		
	8e.	Social Security	8e			.00	\$	***************************************	0.00		
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8f. 8g			.00	\$		0.00	_	
	8h.	Other monthly income. Specify: IRS tax refund	8h				+ \$		0.00	_	
		into tax rotatia		· -					0.00	- -	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	\$ 233	.00	\$		0.00	0	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$	3,471.00	+ \$	(	= 00.00	\$	4,371.00	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	0,47 1.00	* -		700.00	-	7,07 1.00	
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not sify:	depe		•			Schedule J 11		0.00	
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	4,371.00	
									ombir onthl	ned y income	
13.	Do y ■ □	ou expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?							, 111001110	
		The second of th									